



City of Woodcreek

41 Champions Circle, Woodcreek, TX 78676
Phone: 512-847-9390

Commercial/Multi-Family Building Application

Permit No: _____ Date: _____

Property Information

Type of Project: New Construction New Addition Remodel Other _____

Project Name: _____

Project Address: _____

Section: _____ Lot: _____ Current Zoning: _____ Site Plan: P&Z Approval Date _____ City Council Approval Date _____

Approved Sewer System Permit No.: _____ Sewer Tap Connection: _____

Owner/Applicant Information

Applicant's Name: _____ Phone: _____ Email: _____

Applicant's Address: _____ City: _____ State: _____ Zip: _____

Property Owner's Name: _____ Phone: _____ Email: _____

Property Owner's Address: _____ City: _____ State: _____ Zip: _____

Description of Proposed Project: _____

Square Footage: _____ Building Height: _____

Total Cost of the Project (fair market value of labor and materials): \$_____

Required Submittals: Application will not be accepted without all required attachments (see below).

- Digital copy of plat of property
- Digital copy of site plan
- Digital copy of building plans. Construction must be drawn to scale and include sufficient clarity and detail to indicate the nature and character of the work.
- For projects \$50,000 or more – a copy of Texas Accessibility Standards Architectural Plan Review Application with the Project Number
- List of contractors (page 2, add additional pages as necessary)

Final set of plans must be submitted Sealed, Stamped, and Dated by a design professional in charge.

I/We certify as follows: (1) that the building plans and specifications submitted for this project have been prepared in compliance with the 2015 International Building Code, (2) that all construction will be performed in compliance with such code, (3) that no construction, including site preparation, will commence prior to the issuance of: (a) site plan approval, (b) proper zoning approval, and (c) building permit, and (4) agree to comply with all City Codes and Ordinances pertaining to this project. I/We further certify that the information contained in this application is true and correct. I/We understand that if any of the information provided is incomplete or incorrect the permit may not be issued or may be revoked. I/We also allow access to the property for any issued related to the permit application.

Applicant(s): _____ Date: _____

Contractor: _____ Date: _____

List of Contractors:

Project Name: _____

Project Address: _____

Section: _____ Lot: _____ Current Zoning: _____

General Contractor: _____

Company Name: _____

Company Address: _____ City: _____ State: ____ Zip: _____

Contact Name: _____ Email: _____ Phone: _____

Master Electrician: _____ License #: _____ State: _____

Company Name: _____

Company Address: _____ City: _____ State: ____ Zip: _____

Master Plumber: _____ License #: _____ State: _____

Company Name: _____

Company Address: _____ City: _____ State: ____ Zip: _____

Mechanical Contractor: _____ License #: _____ State: _____

Company Name: _____

Company Address: _____ City: _____ State: ____ Zip: _____

Driveway Contractor: _____ License #: _____ State: _____

Company Name: _____

Company Address: _____ City: _____ State: ____ Zip: _____
